

SUMTER CITY-COUNTY PLANNING COMMISSION

POST OFFICE BOX 1449 SUMTER, SC 29151 12 WEST LIBERTY STREET (803) 774-1600



LAND DISTURBANCE PERMIT APPLICATION

Permit Number	Master Permit	Jurisdi	ction 🗌	City County
Applicant				
Name	Phone			
Applicant's Address				
	Street	City	State Zip	1
Owner			Discourse	
Name			Phone	
Owner's Address	Street	City	State	Zip
Contractor	olicot	Oity	Otate	2 .ip
Name			Phone	
Contractor's Address				
	Street	City	State	Zip
Property Address		Tax Map #		
.		0 -		
General Location		Size _		
Remarks				
	Application Completed by:	Agent or	Owner	
	. , , _			
Print Name	ve statements and accompanying Signature	material are complete	Date	
CERTIFICATION I hereby certify that I have read this application and the information supplied herein is true and correct to the best of my knowledge. I agree to comply with all applicable City and/or County Ordinances and State Laws related to land development. I am the property owner, or have received the owner's written authorization to act as his/her agent regarding this matter. I understand that falsifying any information herein may result in nullification of this request and/or appropriate legal remedies. Property Owner or Authorized Agent Name, Signature and Date				
OFFICE USE ONLY: Tax Map Right of Way SW&EC Approved Flood Plan Base Flood Elevation	☐ Yes ☐ No Overlay Dis	otection Approved [otrict: on Park	And ☐ Yes	□ No District □ None
Comments:				
Approval:	Dat	e:		

→ Include an Application Fee of \$50.00 (City or County)